

# 2020-2021



## SNOW BOWL & RMSC YOUTH SCHOLARSHIP APPLICATION

P.O. BOX 1207 • CAMDEN, ME 04843 • 207-236-3438 • FAX 207-230-0490

*Youth Scholarships are funded through contributions to the Camden Snow Bowl, Ragged Mountain Ski Club, the Sally Deaver Fund and the Marcel LaCasse Scholarship Fund.*



### SCHOLARSHIP INFORMATION

- Applicant information is kept confidential. It is reviewed only by the Scholarship Committee
- **Available to eligible children, ages 3 to 16. Adults not eligible for scholarship benefits.**
- Most Scholarship awards do not cover full cost of programs
- Awards are based on need and residency (*As Camden taxpayers subsidize the Snow Bowl, Camden residents receive priority*)
- **Scholarships are available to individuals for a limited number of years (usually three years)**
- All applicants will be notified by MAIL/EMAIL of scholarship awards on a rolling basis
- **APPLICATIONS USUALLY PROCESSED WITHIN TWO WEEKS OF SUBMISSION, BEGINNING DEC. 1st**

<b>PART I</b>		<b>ALL PARTS OF SCHOLARSHIP APPLICATION MUST BE COMPLETED</b>	
AVAILABLE SCHOLARSHIPS ( <i>check ONLY the scholarships you want to be considered for</i> )			
<input type="checkbox"/> <b>COMPETITION PROGRAMS</b> - Please circle selection U-8 U-10 U-12 U-14 U-16 Freestyle *PART II MUST BE COMPLETED	<input type="checkbox"/> <b>BEGINNER SERIES - LEARN TO SKI OR SNOWBOARD</b> (Includes: 3 lessons with rental and lift ticket)		
<input type="checkbox"/> <b>SKI SCHOOL PROGRAMS</b> - Please check-off selection <input type="checkbox"/> WINTER SCHOOL BREAK <input type="checkbox"/> MID-WINTER Program - 6-week program <input type="checkbox"/> FEBRUARY BREAK Program <input type="checkbox"/> SPRING SESSION Program -3-week program	<input type="checkbox"/> <b>SEASON PASS(ES)</b>  <input type="checkbox"/> <b>OTHER:</b> ( <i>Please list</i> )		
<i>Visit CamdenSnowBowl.com for program details and more information</i>			

PLEASE LIST THE NAME(S) OF THE CHILDREN FOR WHOM YOU ARE APPLYING FOR A SCHOLARSHIP  
*Priority considerations are for ages 3-16. Exception is high school racing program*

PLEASE LIST ABILITY AS FOLLOWS: <b>1: NEVER BEEN SKIING/SNOWBOARDING 2: BEEN 10 TIMES 3: GO EVERY WINTER</b>			
NAME:	AGE:	ABILITY:	SCHOLARSHIP(S) REQUESTED:
<i>EXAMPLE: JANE SMITH</i>	<i>8</i>	<i>1: NEVER</i>	<i>BEGINNER SKI SERIES</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### HOUSEHOLD INCOME

Please indicate total yearly household income, including income from employment, unemployment, ASPIRE, TANF, child support, alimony, Social Security, pensions, retirements and all other income.

_____ 0 to \$19,999	_____ \$20,000 to \$29, 999	_____ \$30,000 to \$39,999	
_____ \$40,000 to \$49,999	_____ \$50,000 to 59, 999	_____ \$60,000 and above	

**Total # of people in household:** \_\_\_\_\_ **# of adults:** \_\_\_\_\_ **# children (under 19):** \_\_\_\_\_

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How much can you and your extended family contribute to your child(rens') winter recreation? \_\_\_\_\_

Have you received this scholarship in the past? Y / N If so, when? \_\_\_\_\_

*We ask that families volunteer in some capacity when receiving a scholarship(s). The range of activities varies.*

*Example: Baking for Family Fun Run events, helping set up and clean up at races, etc.*

Did you or family members volunteer at the Snow Bowl last season? Yes No

Please describe: \_\_\_\_\_

Are your children eligible for the federal free and reduced lunch program (TANF, SNAP, etc.)? Yes No

**STATEMENT OF NEED** - Describe your current financial situation and why you are seeking assistance:

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I certify that all of the information on this form is true and correct:

\_\_\_\_\_  
Parent / Guardian signature Date

**Printed name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State, Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Please return the application to:** Camden Snow Bowl  
Attn: RMSC & Snow Bowl Scholarship Committee  
P.O. Box 1207  
Camden, ME 04843

office use only

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## PART II - FOR COMPETITIVE PROGRAM APPLICANTS

To be completed by Parent/Guardian and returned with Scholarship Application

ATHLETE'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

RACING PROGRAM YOU ARE APPLYING FOR: \_\_\_\_\_

How many years has child participated in the Racing Program or any other Snow Bowl programs?

\_\_\_\_\_  
\_\_\_\_\_

Please give us a brief summary of your child's interest in racing and/or experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Name and relationship to athlete \_\_\_\_\_

\_\_\_\_\_  
Parent / Guardian signature

\_\_\_\_\_  
Date